JC10 Rec'd T/PTO 0 9 MAY 2005

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10/009,062 TRANSMITTAL Filing Date June 9, 2000 First Named Inventor **FORM** MAY 0 9 2005 Viney Art Unit **Examiner Name** (to be used for all correspondence after initial filing), 18 P Attorney Docket Number NEU-00120.P.1 Total Number of Pages in This Submission

ENCLOSURES (Check all that apply)										
✓	Fee Transmittal Form	Drawing(s) After Allowance Communication to TC								
	Fee Attached	Licensing-related Papers Appeal Communication to Board of Appeals and Interferences								
	Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Remarks 1. Revocation of Piror Powers and Appointment of Power of Attorney; 2. Copy of cover page of court order granting Trustee's Motion to sell assets; 3. Identification of Patent Application in Order; and 4. Postcard								
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT										
Firm N	David R Preston & Assoc	ates								
Signature										
Printed	d name David R Preston									
Date	Ma 5,20	Reg. No. 38,710								
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PTO/SB/17 (12-04v2)
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Effective on 12/08/2004.				Complete if Known						
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Number	10/009,062					
FEE TRANSMITTAL				Filing Date	June 9,	June 9, 2000				
For FY 2005			First Named Inventor	Viney	Viney					
Applicant claims small entity status. See 37 CFR 1.27				Examiner Name						
✓ Applicant claims smal	Art Unit									
TOTAL AMOUNT OF PAYMENT (\$) 0.00				Attorney Docket No.	NEU-00	120.P.1				
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order None Other (please identify):										
Deposit Account Deposit Account Number: 501321 Deposit Account Name: David R Preston										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
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under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card										
information and authorization on PTO-2038.										
FEE CALCULATION										
BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES										
Application Type	<u>S</u> ı	mall Entity		Small Entity	<u>Smal</u>	I Entity	Fees Paid (\$)			
Utility	Fee (\$) 300		'ee (\$) 500			<u>e (\$)</u> 00	rees Falu (4)			
Design	200		300 100							
Plant	200					65				
Reissue	300		300 500			80				
. Provisional	200	100	0		00 30	00				
i e		100	U	0	U	0	mall Entity			
2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$)										
Each claim over 20 (50	25							
Each independent cla			200 360	100 180						
Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee				Paid (\$)	N		endent Claims			
- 20 or HP =		_ x=		- ura (v)	_	Fee (\$)	Fee Paid (\$)			
HP = highest number of tota	daims paid for Extra Claim		Eas	Doid (\$)						
Indep. Claims - 3 or HP =				Paid (\$)						
- 3 or HP = x = HP = highest number of independent claims paid for, if greater than 3.										
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer										
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50										
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = / 50 = (round up to a whole number) x =										
4. OTHER FEE(S)										
Non-English Specification, \$130 fee (no small entity discount)										
Other (e.g., late filing surcharge):										
SUBMITTED BY (//)										
Registration No. (Attorney/Agent) 38,710 Telephone 858-724-0375										
Name (Print/Type) David R Preston Date // (Attomey/Agent)										

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